Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Frank	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Cassata	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	•	
3.	Only the last 4 digits of		
	your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1252	

Del	otor 1 Frank Cassata		Case number (if known)				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
Include trade names and doing business as names		Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live		If Debtor 2 lives at a different address:				
		1406 Dahill Road Brooklyn, NY 11204					
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Kings					
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

Deb	tor 1 Frank Cassata					Case number (if known)				
						_				
Par	Tell the Court About	Your Bankru	ptcy Case							
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	☐ Chapter 7								
		☐ Chapter	r 11							
		☐ Chapter 12								
		■ Chapter	: 13							
8.	How you will pay the fee	abou order	t how you may	pay. Typically, if you ey is submitting your p	are paying the fe	heck with the clerk's office in yourself, you may pay with ca behalf, your attorney may pay w	sh, cashier's check, or money			
				ee in installments. If stallments (Official Fo		option, sign and attach the Appl	ication for Individuals to Pay			
		☐ I required but is	uest that my fe s not required to	ee be waived (You moo, waive your fee, and	ay request this op I may do so only i	otion only if you are filing for Ch f your income is less than 150% se in installments). If you choos	6 of the official poverty line that			
						Official Form 103B) and file it wi				
9.	Have you filed for	■ No.								
	bankruptcy within the last 8 years?	☐ Yes.								
			District		When	Case number	r			
			District		When	Case number				
			District		When	Case number				
10.	Are any bankruptcy cases pending or being	■ No								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
			Debtor			Relationship to	you			
			District		When	Case number,				
			Debtor		14/1	Relationship to	, <u> </u>			
			District		When	Case number,	if known			
11.	Do you rent your residence?	■ No.	Go to line 12.							
		☐ Yes.	Has your land	dlord obtained an evic	tion judgment aga	ainst you?				
			□ No. G	So to line 12.						
				Fill out <i>Initial Statemen</i> ankruptcy petition.	nt About an Evict	ion Judgment Against You (Fori	n 101A) and file it as part of			

Deb	tor 1	Frank Cassata				Case number (if known)			
Part	3:	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12. Are you a sole proprietor of any full- or part-time			■ No.	Go to	Part 4.				
	busir	ness?	_	NI.	and bracker of box				
	A I	a managatanak ta ta a	☐ Yes.	Name	and location of bus	iness			
	busin an ind separ as a	e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.			of business, if any				
	sole p	have more than one proprietorship, use a rate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code			
	it to this petition. Check the appropriate box to describe your business:					x to describe your business:			
					Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
					•	Estate (as defined in 11 U.S.C. § 101(51B))			
				☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))					
					-	er (as defined in 11 U.S.C. § 101(6))			
					None of the above				
13.	Chap Bank	rou filing under oter 11 of the cruptcy Code and are a small business	deadlines operation	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can eadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheep perations, cash-flow statement, and federal income tax return or if any of these documents do not exist, followed 11 U.S.C. 1116(1)(B).					
		definition of small	■ No.	I am r	not filing under Chap	oter 11.			
		ess debtor, see 11 C. § 101(51D).	□ No.	I am f Code.	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
			☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4:	Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.		ou own or have any	■ No.						
		erty that poses or is ed to pose a threat	☐ Yes.						
	of im	minent and ifiable hazard to	□ 163.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?				liate attention is why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?									
	. 33.	1				Number, Street, City, State & Zip Code			

Debtor 1 Frank Cassata Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Frank Cassata Case number (if known)											
Par	t 6: Answer These Quest	ions for R	eporting Purposes								
16.	What kind of debts do you have?	16a.	Are your debts primarily consuindividual primarily for a personal		ned in 11 U.S.C. § 101(8) as "incurred by an						
			☐ No. Go to line 16b.								
			Yes. Go to line 17.								
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.								
			☐ No. Go to line 16c.								
			☐ Yes. Go to line 17.								
		16c.	State the type of debts you owe t	hat are not consumer debts or busines	s debts						
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. G	Go to line 18.							
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?								
	administrative expenses		□ No								
	are paid that funds will be available for		□Yes								
	distribution to unsecured creditors?										
18.	How many Creditors do	1 -49		1 ,000-5,000	1 25,001-50,000						
	you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 40,004,05,000	☐ 50,001-100,000 ☐ More than100,000						
		☐ 100-19 ☐ 200-9		□ 10,001-25,000	☐ More than 100,000						
19.	How much do you	□ \$0 - \$	50,000	■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion						
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion						
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion						
20.	How much do you estimate your liabilities	□ \$0 - \$9	50,000 001 - \$100,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion						
	to be?		001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$10 billion						
			001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion						
Par	t7: Sign Below										
For	you	I have ex	amined this petition, and I declare	under penalty of perjury that the inform	nation provided is true and correct.						
				m aware that I may proceed, if eligible, available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).									
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.									
		bankrupto and 3571	derstand making a false statement, concealing property, or obtaining money or property by fraud in connection with a kruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, 3571. Frank Cassata								
		Frank C		Signature of Debto	r 2						
		Executed		Executed on							
		_xecute0	July 6, 2018 MM / DD / YYYY		/ DD / YYYY						

For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	d States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, schedules filed with the petition is incorrect.	certify that I have no know	ledge after an inquiry that the information in the
	/s/ DAVID I. PANKIN, ESQ. Signature of Attorney for Debtor	Date	July 6, 2018 MM / DD / YYYY
	DAVID I. PANKIN, ESQ.		
	David I. Pankin, P.C.		
	48 Willoughby Street Brooklyn, NY 11201-5202		
	Number, Street, City, State & ZIP Code Contact phone 718-243-2444	Email address	info@pankinlaw.com
	2762 NY Bar number & State		

Fill	in this information to	identify your	case:					
Deb	otor 1 Fran	k Cassata						
Dob	First Na	me	Middle Name	Last Nam	е			
	use if, filing) First Na	me	Middle Name	Last Nam	e			
Unit	ed States Bankruptcy	Court for the:	EASTERN DISTRICT	OF NEW YORK				
Cas	e number						☐ Chec	k if this is an
							amen	ded filing
	ficial Form 10	_						
					Statistical Inform			12/15
infor	mation. Fill out all of	your schedul		the information of	her, both are equally resp on this form. If you are filir top of this page.			
Part	1: Summarize Yo	ur Assets						
							Your a	ssets of what you own
1.	Schedule A/B: Prop 1a. Copy line 55, Tota						\$	1,016,871.00
	1b. Copy line 62, Total	al personal pro	perty, from Schedule A/	В			\$	122,237.71
	1c. Copy line 63, Tota	al of all propert	y on Schedule A/B				\$	1,139,108.71
Part	2: Summarize You	ur Liabilities						
							Your li	abilities
							Amoun	t you owe
2.			laims Secured by Prope mn A, Amount of claim,		06D) a last page of Part 1 of <i>Sche</i>	edule D	\$	453,653.88
3.			Unsecured Claims (Office 1) (priority unsecured class		f Schedule E/F		\$	7,984.02
	3b. Copy the total cla	aims from Part	2 (nonpriority unsecured	d claims) from line 6	6j of Schedule E/F		\$	410.29
					Your total	liabilities	\$	462,048.19
Part	3: Summarize Yo	ur Income and	Expenses					
4.	Schedule I: Your Inco			ule I			\$	6,102.76
5.	Schedule J: Your Exp Copy your monthly ex						\$	4,724.00
Part	4: Answer These	Questions for	Administrative and St	atistical Records				
6.			er Chapters 7, 11, or 1s on this part of the form.		d submit this form to the cou	urt with you	r other sc	hedules.
7.	Yes What kind of debt d	o vou bavo?						
۲.		•	sumer dehts. Consum	er dehts are those "	incurred by an individual pri	marily for s	nersonal	family or
	household purpo	ose." 11 U.S.C.	§ 101(8). Fill out lines 8	8-9g for statistical p	urposes. 28 U.S.C. § 159.	•		•
	Your debts are the court with your			have nothing to rep	ort on this part of the form.	Check this	<i>box</i> and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Frank Cassata Case number (if known)

3. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,102.76

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tota	ıl claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	7,984.02
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	7,984.02

Fill in this info	rmation to identify you	ur case and this fili	ina	:				
Debtor 1	Frank Cassata			•				
	First Name	Middle Name	Э	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	9	Last Name				
United States B	Bankruptcy Court for the	EASTERN DIST	ΓRΙ	CT OF NEW YORK				
Case number								Check if this is an
								amended filing
Official Fo	orm 106A/B							
_	le A/B: Pro	pertv						12/15
think it fits best. information. If mo Answer every que	Be as complete and accurate space is needed, attacestion.	urate as possible. If tw ch a separate sheet to	wo o th	only once. If an asset fits in more than one married people are filing together, both are is form. On the top of any additional pages Estate You Own or Have an Interest In	equally r	esponsible for s	upplyi	ing correct
□ No. Go to Pa		ble interest in any re	sid	ence, building, land, or similar property?				
	hill Road s, if available, or other descripti	ion	hat □ ■	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amo	ount of any secure	ed clai	or exemptions. Put ms on <i>Schedule D:</i> ecured by Property.
Brooklyr	n NY 1	4004 0000		Manufactured or mobile home		t value of the		rrent value of the
City	State			Investment property		oroperty? ,016,871.00	ро	rtion you own? \$1,016,871.00
				Timeshare Other	(such a	as fee simple, ter		ownership interest by the entireties, or
				has an interest in the property? Check one Debtor 1 only	fee si	state), if known. mple		
Kings				Debtor 2 only				
County				Debtor 1 and Debtor 2 only At least one of the debtors and another		neck if this is cor	nmun	ity property
		Ot	ther	information you wish to add about this iter erty identification number:	,	,		
		on you own for all o	of y	your entries from Part 1, including any r here				\$1,016,871.00
someone else d	ase, or have legal or e	nicle, also report it or	n S	ny vehicles, whether they are registere schedule G: Executory Contracts and Une rcycles			ehicle	es you own that
■ No								
□ Yes								

De	ebtor 1	Frank Cassat	ta Case number (if known)
			or homes, ATVs and other recreational vehicles, other vehicles, and accessories motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	9S
- 1	■ No			
ı	☐ Yes			
5			the portion you own for all of your entries from Part 2, including any entries for Part 2. Write that number here	
Pa	art 3: Des	scribe Your Persor	nal and Household Items	
			gal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example No	old goods and fues: Major appliand	urnishings ces, furniture, linens, china, kitchenware	
				#5.000.00
			Misc. household contents	\$5,000.00
7.	□ No	es: Televisions an	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; phones, cameras, media players, games	music collections; electronic devices
			2 televisions, 3 computers, 1 cell phone	\$1,550.00
	■ No □ Yes. Equipme	other collection Describe ent for sports an	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; star ons, memorabilia, collectibles and hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	
	■ No	musical instru		,,
10.	■ No		, shotguns, ammunition, and related equipment	
11.	□ No ′		thes, furs, leather coats, designer wear, shoes, accessories	
			Misc. clothing	\$400.00
12.	□ No Î		velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, Misc. jewelry	gems, gold, silver

Official Form 106A/B

De	ebtor 1	Frank Cassata			Case number (if known)	
13.	Non-far	m animals				
		les: Dogs, cats, birds	, horses			
	■ No					
	⊔ Yes.	Describe				
14.		er personal and ho	usehold items you did n	ot already list, including any h	ealth aids you did not list	
	■ No	Oi	4 :			
	⊔ Yes.	Give specific informa	tion			
15				rt 3, including any entries for p		\$11,950.00
Pa	rt 4: Des	cribe Your Financial A	ssets			
Do	you ow	n or have any legal	or equitable interest in a	any of the following?		Current value of the
						portion you own? Do not deduct secured claims or exemptions.
16.	□ No		in your wallet, in your hon	ne, in a safe deposit box, and on	hand when you file your petition	on
					Cash	\$10.00
17.	Deposit	s of money				
	_			unts; certificates of deposit; share with the same institution, list each		nouses, and other similar
	□ No			Institution name:		
	■ Yes					
		17	7.1. checking	Chase Account #: xx4632		\$3,000.00
18.	Examp		ublicly traded stocks stment accounts with brok	kerage firms, money market acco	punts	
	■ No		Institution or issuer n	ame:		
	□ res		montation of locaci ii	amo.		
19.	joint ve	•	and interests in incorpo	rated and unincorporated busi	nesses, including an interes	t in an LLC, partnership, and
	■ No	Give specific informa	tion about them			
	□ 165.	Give specific informa	Name of entity:	···	% of ownership:	
20.	Negotia	able instruments inclu	ide personal checks, cash	iable and non-negotiable instruiers' checks, promissory notes, a	and money orders.	
	Non-ne No	gotiable instruments	are those you cannot tran	sfer to someone by signing or de	elivering them.	
		Give specific informat	ion about them			
		·	Issuer name:			
		nent or pension acco les: Interests in IRA, I		3(b), thrift savings accounts, or o	other pension or profit-sharing	plans
	Yes. L	ist each account sep	•	Institution name:		
		13	pe of account:	Institution name:		
				457 Plan with Prudent	ial	\$107,277.71

D	ebtor 1	Frank Cass	ata	Case number (if know	wn)
				New York City District Council of Carpenters Benefit Funds	\$0.00
22	Your sl Examp ■ No	hare of all unus oles: Agreemen		you may continue service or use from a company cutilities (electric, gas, water), telecommunications com	panies, or others
				Institution name or individual:	
23	i. Annuit i ■ No □ Yes	`	for a periodic payment of money to y ssuer name and description.	ou, either for life or for a number of years)	
24	Interest	s in an educat	·	ed ABLE program, or under a qualified state tuition	program.
	☐ Yes	1	nstitution name and description. Sep	parately file the records of any interests.11 U.S.C. § 521	(c):
25	■ No		uture interests in property (other t	han anything listed in line 1), and rights or powers	exercisable for your benefit
26	Examp ■ No	oles: Internet do	trademarks, trade secrets, and oth main names, websites, proceeds fro nformation about them	ner intellectual property om royalties and licensing agreements	
27	Examp ■ No	oles: Building pe	, and other general intangibles ermits, exclusive licenses, cooperative of the matter	ve association holdings, liquor licenses, professional lic	enses
M	loney or	property owed	to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	■ No	unds owed to		ther you already filed the returns and the tax years	
29	■ No			t, child support, maintenance, divorce settlement, prop	erty settlement
30	Examp	oles: Unpaid wa	inpaid loans you made to someone e	disability benefits, sick pay, vacation pay, workers' con else	npensation, Social Security
31	Examp	ts in insurance bles: Health, dis		igs account (HSA); credit, homeowner's, or renter's inst	urance
	■ No □ Yes.	Name the insur	rance company of each policy and lis Company name:	et its value. Beneficiary:	Surrender or refund value:

Deb	tor 1	Frank Cassata		Case number (if known)	
_	If you a	terest in property that is due you from someone who has are the beneficiary of a living trust, expect proceeds from a life one has died.		are currently entitled to rece	ive property because
	■ No □ Yes.	Give specific information			
_		against third parties, whether or not you have filed a law bles: Accidents, employment disputes, insurance claims, or rig		and for payment	
_	_	Describe each claim			
	Other o	contingent and unliquidated claims of every nature, inclu	ding counterclaims (of the debtor and rights to	set off claims
		Describe each claim			
	Any fin ■ No	ancial assets you did not already list			
_	_	Give specific information			
36.		he dollar value of all of your entries from Part 4, including art 4. Write that number here			\$110,287.71
Part	5: De	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
		own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. G	Go to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
40			ar asymmetrial fishin	an related meanants?	
46.	_ `	own or have any legal or equitable interest in any farm-	or commercial fishin	ig-related property?	
	_	Go to Part 7.			
		. Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53.		have other property of any kind you did not already list?	•		
	<i>Examp</i> ■ No	oles: Season tickets, country club membership			
		Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form		L	
55.	Part 1	l: Total real estate, line 2			\$1,016,871.00
56.	Part 2	2: Total vehicles, line 5	\$0.00		
57.	Part 3	3: Total personal and household items, line 15	\$11,950.00		
58.	Part 4	1: Total financial assets, line 36	\$110,287.71		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$122,237.71	Copy personal property to	stal \$122,237.71
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$1,139,108.71

H	I in this inform	ation to identify your case:				
De	ebtor 1	Frank Cassata First Name	Middle Name	L	ast Name	
De	ebtor 2					
(Sp	ouse if, filing)	First Name	Middle Name	L	ast Name	
Ur	nited States Ban	kruptcy Court for the: EAST	ERN DISTRICT OF N	EW Y	ORK	
Ca	ase number					
(if k	known)					☐ Check if this is an amended filing
_						amended ming
	fficial For					
<u>S</u>	chedule	C: The Proper	rty You Cla	<u>iim</u>	as Exempt	4/16
the nee cas	property you lis eded, fill out and se number (if kno	ted on Schedule A/B: Property attach to this page as many coown).	(Official Form 106A/B) opies of <i>Part 2: Addition</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and
spe any fun exe	ecific dollar am / applicable sta ds—may be ur emption to a pa	ount as exempt. Alternatively tutory limit. Some exemptior limited in dollar amount. Ho	y, you may claim the f ns—such as those for wever, if you claim an	full fai r healt r exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a sing exempted up to the amount of penefits, and tax-exempt retirement ue under a law that limits the t, your exemption would be limited
Pa	rt 1: Identify	the Property You Claim as E	Exempt			
1.	Which set of	exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	You are cla	iming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are cla	iming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.		,		empt.	fill in the information below.	
	Brief descriptio	n of the property and line on nat lists this property	Current value of the portion you own	•	ount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B (iat iists tiiis property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		Road Brooklyn, NY 11204		_	\$170,825.00	NYCPLR § 5206
	Kings Counting from School	-			100% of fair market value, up to any applicable statutory limit	
	Misc. house	hold contents	\$5,000.00		\$5,000.00	NYCPLR § 5205(a)(5)
	Line nom Sch	edule AVD. V. I			100% of fair market value, up to any applicable statutory limit	
	2 televisions	s, 3 computers, 1 cell	\$1,550.00		\$1,550.00	NYCPLR § 5205(a)(5)
	Line from Scho	edule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Misc. clothi	ng edule A/B: 11.1	\$400.00	•	\$400.00	NYCPLR § 5205(a)(5)
	LINE HOIN SCH	cuule AVD. IIII			100% of fair market value, up to any applicable statutory limit	
	Misc. jewelr		\$5,000.00		\$5,000.00	NYCPLR § 5205(a)(6)
	Line from Sche	edule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Debto	or 1 Frank Cassata			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	157 Plan with Prudential Line from Schedule A/B: 21.1	\$107,277.71		\$107,277.71	Debtor & Creditor Law § 282(2)(e)
L	Line Hom Schedule A/B. 21-1			100% of fair market value, up to any applicable statutory limit	202(2)(6)
	New York City District Council of Carpenters Benefit Funds	\$0.00		\$0.00	Debtor & Creditor Law § 282(2)(e)
	Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	202(2)(6)
(Are you claiming a homestead exemption Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cove No Yes	3 years after that for ca	ases fi	ŕ	,

Fill in this information to identify yo	our case:			
Debtor 1 Frank Cassata	I Middle Name Last I	Nama	-	
Debtor 2	wildle warie Last i	vanie		
(Spouse if, filing) First Name	Middle Name Last I	Name	-	
United States Bankruptcy Court for th	e: EASTERN DISTRICT OF NEW YOR	K		
Casa awahan			-	
Case number			☐ Check	if this is an
				led filing
				-
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Sec	cured by Propert	У	12/15
	e. If two married people are filing together, bot it out, number the entries, and attach it to this			
1. Do any creditors have claims secured	by your property?			
☐ No. Check this box and submit	this form to the court with your other scheo	lules. You have nothing else	to report on this form.	
Yes. Fill in all of the information	·	3 · · · ·		
	n below.			
Part 1: List All Secured Claims		. Column A	Column B	Column C
for each claim. If more than one creditor h	s more than one secured claim, list the creditor se as a particular claim, list the other creditors in Par etical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion
2.1 NYC Dept of Finance	Describe the property that secures the cla	A	\$1,016,871.00	\$0.00
Creditor's Name	1406 Dahill Road Brooklyn, NY			
PO Box 3615	11204 Kings County			
Church Street Station	As of the date you file, the claim is: Check a	Il that		
New York, NY 10008-3615	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortga	ge or secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's	s lien)		
At least one of the debtors and another	3			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Violations		
Date debt was incurred 2012-2017	Last 4 digits of account number	1273		
2.2 NYC Water Board	Describe the property that secures the cla	im: \$3,158.42	\$1,016,871.00	\$0.00
Creditor's Name	1406 Dahill Road Brooklyn, NY	Ψ5,130.42	Ψ1,010,071.00	Ψ0.00
	11204 Kings County			
59-17 Junction Blvd		W		
Elmhurst, NY	As of the date you file, the claim is: Check a apply.	II that		
Elmhurst, NY 11373-5108	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the debt2 O	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage car loan)	ge or secured		
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's	s lien)		
At least one of the debtors and another	,			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2017	Last 4 digits of account number	6639		

Official Form 106D

Debtor 1	Frank Cassata		Case number (if know)		
	First Name Middle	e Name Last Name			
2.3 Se	lene Finance	Describe the property that secures the claim	m: \$445,055.00	\$1,016,871.00	\$0.00
	ditor's Name	1406 Dahill Road Brooklyn, NY 11204 Kings County			
Su	90 Richmond lite 400 South ouston, TX 77042	As of the date you file, the claim is: Check al apply. ☐ Contingent	II that		
	nber, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
■ Debtor	•	Nature of lien. Check all that apply. An agreement you made (such as mortgag car loan)	ge or secured		
_	r 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's	: lien)		
☐ Check	st one of the debtors and anothe k if this claim relates to a munity debt	r ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ Morto	gage		
	t was incurred 2000	Last 4 digits of account number	7908		
If this is Write th	s the last page of your form, ac nat number here:	Column A on this page. Write that number here	e: \$453,65 \$453,65		
Use this periods than one	page only if you have others to collect from you for a debt you	for a Debt That You Already Listed be notified about your bankruptcy for a debt to u owe to someone else, list the creditor in Part of hat you listed in Part 1, list the additional credit this page.	1, and then list the collection ag	ency here. Similarly, if you	have more
Kı Ma 56	ame, Number, Street, City, State nuckles Komosinski & anfro LLP 65 Taxter Rd, Suite 590 lmsford, NY 10523	·	On which line in Part 1 did you er Last 4 digits of account number _		
N' Oz P(ame, Number, Street, City, State YC Dept of Finance ATH Violations Process O Box 2307 ew York, NY 10272-2307	in	On which line in Part 1 did you er Last 4 digits of account number _		
Ro 51	ame, Number, Street, City, State osicki Rosicki & Asso P I East Bethpage Road lainview, NY 11803	ec '	On which line in Part 1 did you er Last 4 digits of account number _		
Ro 2 Si	ame, Number, Street, City, State osicki Rosicki & Asso P Summit Court uite 301 shkill. NY 12524	C '	On which line in Part 1 did you er Last 4 digits of account number _		

Fill	I in this information to identify your case:						
Dei	Frank Cassata First Name	Middle Name	Last Name	9			
	btor 2						
(Spc	ouse if, filing) First Name	Middle Name	Last Name	e	_		
Uni	ited States Bankruptcy Court for the: EAS	STERN DISTRICT OF NEW	YORK				
Car	se number						
	nown)					☐ Check	if this is an
						amend	ed filing
∩ff	ficial Form 106E/F						
	chedule E/F: Creditors Who I	Have Unsecured	Claim	s			12/15
	as complete and accurate as possible. Use Part				or creditors with NON	PRIORITY claims. Li	
	executory contracts or unexpired leases that contracts and Unexpired Leases that contracts and Unexpired Leases						
Sche	edule D: Creditors Who Have Claims Secured by	y Property. If more space is n	eeded, co	py the Part	you need, fill it out,	number the entries in	the boxes on the
	Attach the Continuation Page to this page. If you and case number (if known).	ou have no information to rep	ort in a Pa	rt, do not f	ile that Part. On the to	op of any additional	pages, write your
	rt 1: List All of Your PRIORITY Unsecur	ed Claims					
1.	Do any creditors have priority unsecured claim	ns against you?					_
	☐ No. Go to Part 2.						
	Yes.						
2.	List all of your priority unsecured claims. If a c						
	identify what type of claim it is. If a claim has both possible, list the claims in alphabetical order accordance.						
	Part 1. If more than one creditor holds a particular						
	(For an explanation of each type of claim, see the	instructions for this form in the	instruction	booklet.)	Total claim	Priority	Nonpriority
						amount	amount
2.1	David I Pankin PC Priority Creditor's Name	Last 4 digits of accoun	nt number	1252	\$2,000.00	\$2,000.00	\$0.00
	48 Willoughby Street	When was the debt inc	urred?	2018			
	Brooklyn, NY 11201					=	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file,	the claim	is: Check a	ill that apply		
	Debtor 1 only	☐ Contingent					
	_	☐ Unliquidated					
	☐ Debtor 2 only	Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY uns		um:			
	At least one of the debtors and another	Domestic support ob					
	☐ Check if this claim is for a community del		-		=		
	Is the claim subject to offset? No	Claims for death or p	ersonai inj	ury while yo	u were intoxicated		
	☐ Yes	Other. Specify	nkruptc	y legal fe	:e		
				,			
2.2		Last 4 digits of accoun	nt number	1252	\$5,984.02	\$5,984.02	\$0.00
	Priority Creditor's Name PO Box 7346	When was the debt inc	urred?	2016			
	Philadelphia, PA 19101-7436			2010		-	
	Number Street City State ZIp Code	As of the date you file,	the claim	is: Check a	Ill that apply		
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY uns		im:			
	\square At least one of the debtors and another	☐ Domestic support ob	ligations				
	\square Check if this claim is for a community del				•		
	Is the claim subject to offset?	Claims for death or p	ersonal inj	ury while yo	u were intoxicated		
	■ No □ Yes	Other. Specify	roonel !-	100mc 1-	V 0**00**0		
	∟ 1€5	pe	ı sundi li	iconne ta	x arrears		

Official Form 106 E/F

Debtor '	Frank Cassata	Case number (if know)	
Part 2:	List All of Your NONPRIORITY Unse	cured Claims	
	ny creditors have nonpriority unsecured cla		
ЦМ	Io. You have nothing to report in this part. Subm	nit this form to the court with your other schedules.	
Y	es.		
unse	cured claim, list the creditor separately for each one creditor holds a particular claim, list the other.	the alphabetical order of the creditor who holds each claim. If a creditor has more that in claim. For each claim listed, identify what type of claim it is. Do not list claims already income creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more Continuation Page of
			Total claim
	Maimonides Medical Center	Last 4 digits of account number 4325	\$200.00
	Nonpriority Creditor's Name PO Box 417629	When was the debt incurred? 2017	
	Boston, MA 02241	When was the dest incurred:	-
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical debt	-
	Prohealth Care Assoc LLP Nonpriority Creditor's Name	Last 4 digits of account number 5528	\$210.29
	PO Box 3475	When was the debt incurred? 2018	
	Toledo, OH 43607-0475		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	П	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	_	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify medical debt	
	— 163	Other. Specify	-
rt 3:	List Others to Be Notified About a D	ebt That You Already Listed	
se thi s tryin ave n	s page only if you have others to be notified g to collect from you for a debt you owe to s	l about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For examp someone else, list the original creditor in Parts 1 or 2, then list the collection agency nat you listed in Parts 1 or 2, list the additional creditors here. If you do not have add	y here. Similarly, if you
me an	d Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
•	uter Credit	Line 4.1 of (Check one):	ims
_	est Hanes Mill Road	■ Part 2: Creditors with Nonpriority Unsecured	Claims
instc	on Salem, NC 27113-5238	Last 4 digits of account number	
me an	d Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	partment of Justice	Line <u>2.2</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Clai	ims
x Di	vision	□ Part 1: Creditors with Priority Unsecured Clar	
ox <u>5</u> 5		- Fait 2. Creditors with monthholity offsecured	OidiiII3
	anklin Station ngton, DC 20044		

Official Form 106 E/F

Debtor 1	Frank Cassata		Case number (if know)	
		Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	7,984.02
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	7,984.02
				Т	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	410.29
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	410.29

Fill in this information to identify your case:						
Debtor 1	Frank Cassata					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1			·		
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

					1
Fill in this in	formation to identify your	case:			
Debtor 1	Frank Cassata First Name	Middle Name	Last Name		
Debtor 2	Filst Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number	r				
(if known)					☐ Check if this is an
					amended filing
~"···	- 40011				
	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
■ No □ Yes 2. Within Arizona, ■ No. Go	u have any codebtors? (If the last 8 years, have you California, Idaho, Louisiana, to to line 3. Oid your spouse, former spor	ı lived in a community pr Nevada, New Mexico, Pu	operty state or territor erto Rico, Texas, Wash	r y? (Community proper	ty states and territories include)
in line 2 Form 10 out Colu	again as a codebtor only i 6D), Schedule E/F (Official Imn 2. Jumn 1: Your codebtor	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed to DGG). Use Schedule D	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil editor to whom you owe the debt
Nan	ne, Number, Street, City, State and Z	P Code		Check all schedul	es that apply:
3.1				☐ Schedule D, lir	ne
Nar	me			☐ Schedule E/F,	line
				☐ Schedule G, lii	ne
Nur	mber Street			<u> </u>	
City		State	ZIP Code		
3.2				Cobodulo D li	
Nar	me			☐ Schedule D, lir☐ Schedule E/F,	
				☐ Schedule G, lii	
Nur City	mber Street	State	ZIP Code		
,					

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Fill	in this information to	o identify your ca	se:								
Del	otor 1	Frank Cassa	ta								
	otor 2 ouse, if filing)					_					
Uni	ted States Bankrupt	tcy Court for the:	EASTERN DISTRICT	OF NEW YORK							
	se number						_	if this is:	1.00		
(11 14							☐ A s		nt showir	ng postpetition	
O.	fficial Form	1061								following date:	
	chedule I: `		ome				MM	I / DD/ Y	YYY		12/15
sup spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you a	ible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not includ	spouse is de inforn	s livi natio	ng with yo n about y	ou, inclu our spo	ide infori use. If m	mation about ore space is	your needed,
1.	Fill in your emploinformation.	oyment		Debtor 1				Debtor 2	or non-f	iling spouse	
	If you have more t		Francisco estatua	☐ Employed				☐ Emplo	yed		
	attach a separate page with information about additional employers.	Employment status	■ Not employed			[□ Not er	nployed			
			Occupation	retired							
	Include part-time, self-employed wo		Employer's name								
	Occupation may in or homemaker, if		Employer's address								
			How long employed the	here?							
Par	t 2: Give Det	ails About Mon	thly Income								
	mate monthly inco		te you file this form. If	you have nothing to re	port for a	any li	ne, write \$	0 in the	space. In	clude your no	n-filing
•	u or your non-filing : e space, attach a se	•	re than one employer, co	ombine the information	n for all e	mplo	yers for th	at perso	n on the I	ines below. If	you need
							For Debto	or 1		ebtor 2 or ling spouse	
2.			y, and commissions (be alculate what the monthle		2.	\$_		0.00	\$	N/A	-
3.	Estimate and list	monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross l	Income. Add lin	e 2 + line 3.		4.	\$_	0	.00_	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Frank Cassata		Case	number (if known)			
	Сор	y line 4 here	4.	For	Debtor 1		Debtor 2 or -filing spouse N/A	
5.		all payroll deductions:						
J.			Fo	\$	0.00	¢	NI/A	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	- \$ \$	0.00	\$_ \$	N/A N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$_	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$_	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$_	N/A	
	5h.	Other deductions. Specify:	5h	+ \$_	0.00	+ \$_	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$_	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	- \$ \$	0.00	\$ 	N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		Ψ_	0.00	Ψ	IVA	
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	4,102.76	\$	N/A	
	8h.	Other monthly income. Specify: Contribution from employed daughter	8h.+	+ \$_	2,000.00	+ \$_	N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	6,102.76	\$_	N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		6,102.76 + \$		N/A = \$	6,102.76
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-				,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedulde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are recify:	our deper		•	•	Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Schedules and Statistical Summary of Ceies					12. \$ Combin	6,102.76
								iea / income
13.		you expect an increase or decrease within the year after you file this fo	rm?					,
		Yes. Explain:						

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	ur case:			Ī				
	tor 1	Frank Cassa				Ch	eck i	f this is:		
	otor 2 ouse, if filing)						A s		ving postpetition cha	pter
		untcy Court for the	FASTE	RN DISTRICT OF NEW	YORK			M / DD / YYYY		
		uptoy Court for the.	LAGIL	THE PROPERTY OF THE VI	TORK		1411	W. 7 D D 7 T T T T		
1	e number nown)									
O	fficial Fo	rm 106J								
		J: Your I								12/1
info	ormation. If m		eded, atta	If two married people ch another sheet to thing.						
Par	t 1: Descr	ibe Your House	hold							
	No. Go to		n a conor	oto household?						
	□N	0	·	al Form 106J-2, <i>Expen</i> s	es for Separate House	ehold of De	ebtor	2.		
2.		e dependents?	□ No	, , ,						
	Do not list Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		_	Dependent's age	Does dependent live with you?	
	Do not state dependents				daughter			24	□ No ■ Yes	
									□ No □ Yes	
							_		□ Yes	
							_		☐ Yes ☐ No	
									☐ No☐ Yes	
3.	expenses of	penses include f people other th d your depender	nan $_{\square}$	No Yes						
Est	imate your ex		our bankr	y Expenses uptcy filing date unless y is filed. If this is a su						
the	lude expense value of sucl ficial Form 10	n assistance and	on-cash d have inc	government assistance luded it on <i>Schedule I</i>	e if you know : Your Income			Your expe	enses	
4.		or home owners		ses for your residence r lot.	. Include first mortgag	je 4.	\$		2,529.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	4b. Prope	rty, homeowner's	-			4b.	\$		0.00	
				ipkeep expenses		4c. 4d.			0.00	
5.		owner's associati nortgage payme		dominium dues o ur residence, such as l	nome equity loans	4a. 5.			0.00	

Debtor 1 F	rank Cassata	Case num	ber (if known)	
. Utilities	:			
	lectricity, heat, natural gas	6a.	\$	350.00
	/ater, sewer, garbage collection	6b.	\$	200.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	270.00
	ther. Specify:	6d.	\$	0.00
	nd housekeeping supplies	7.	\$	900.00
	re and children's education costs	8.	\$	0.00
	g, laundry, and dry cleaning	9.	\$	125.00
	al care products and services	10.	\$	50.00
	and dental expenses	11.	\$	
	•	11.	Ψ	25.00
•	ortation. Include gas, maintenance, bus or train fare. nclude car payments.	12.	\$	85.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	90.00
	ble contributions and religious donations	14.	· -	100.00
5. Insuran	<u> </u>	17.	Ψ	100.00
	nclude insurance deducted from your pay or included in lines 4 or 20.			
	fe insurance	15a.	\$	0.00
	ealth insurance	15b.	·	0.00
	ehicle insurance	15c.	· -	0.00
	ther insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Specify:		16.	\$	0.00
	nent or lease payments:			
17a. C	ar payments for Vehicle 1	17a.	\$	0.00
17b. C	ar payments for Vehicle 2	17b.	\$	0.00
17c. O	ther. Specify:	17c.	\$	0.00
17d. O	ther. Specify:	17d.	\$	0.00
	yments of alimony, maintenance, and support that you did not report a		Ф.	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I)). 18.	·	
_	ayments you make to support others who do not live with you.		\$	0.00
Specify:		19.	_	
	eal property expenses not included in lines 4 or 5 of this form or on Sci			0.00
	ortgages on other property	20a.	·	0.00
	eal estate taxes	20b.	· -	0.00
	roperty, homeowner's, or renter's insurance	20c.		0.00
	aintenance, repair, and upkeep expenses	20d.	·	0.00
20e. H	omeowner's association or condominium dues	20e.	· .	0.00
1. Other: S	Specify:	21.	+\$	0.00
2. Calcula	te your monthly expenses			
	d lines 4 through 21.		\$	4,724.00
	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	-,
	d line 22a and 22b. The result is your monthly expenses.		\$	4 724 00
			Ψ	4,724.00
	te your monthly net income.			
	opy line 12 (your combined monthly income) from Schedule I.	23a.		6,102.76
23b. C	opy your monthly expenses from line 22c above.	23b.	-\$	4,724.00
23c Si	ubtract your monthly expenses from your monthly income.			
	the result is your monthly net income.	23c.	\$	1,378.76
4 De ve	expect an increase or decrease in your expenses within the year offer.	vou filo thio	form?	
	expect an increase or decrease in your expenses within the year after youngle, do you expect to finish paying for your car loan within the year or do you expect you			e or decrease because of a
	ion to the terms of your mortgage?		,	
■ No.				
☐ Yes.	Explain here:			

Fill in this info	rmation to identify your	case:				
Debtor 1	Frank Cassata					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	Sankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK			
Case number (if known)					☐ Check if this is an amended filing	
Official For Declara		n Individual	Debtor's Sch	edules	12	15
If two married p	people are filing togethe	r, both are equally respon	sible for supplying correc	et information.		
obtaining mone years, or both.		n connection with a bankr			tement, concealing property, or 100, or imprisonment for up to 2	
Did you pa	ay or agree to pay some	one who is NOT an attorn	ey to help you fill out ban	kruptcy forms?		
■ No						
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notic n, and Signature (Official Form 11	
	alty of perjury, I declare re true and correct.	that I have read the summ	nary and schedules filed v	with this declarat	ion and	
X /s/ Fra	ank Cassata		x			
	Cassata ure of Debtor 1		Signature of De	ebtor 2		
Date	July 6, 2018		Date			

Official Form 106Dec

Fill i	n this inform	nation to identify you	r case:			
Debt		Frank Cassata				
		First Name	Middle Name	Last Name		
Debt (Spou	tor 2 se if, filing)	First Name	Middle Name	Last Name		
` '			EASTERN DISTRICT OF			
Unite	eu States da	nkruptcy Court for the:	EASTERN DISTRICT OF	NEW TORK		
Case (if kno	e number wn)					Check if this is an amended filing
		rm 107	A			
				duals Filing for B		4/10
infori numb	mation. If moer (if know	nore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write yo	
Part			rital Status and Where You	Lived Before		
1. \	wnat is you	r current marital statu	IS?			
	☐ Married					
	Not ma	rried				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Lis	st all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	I.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
					ity property state or territorico, Texas, Washington and \	
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Expla	in the Sources of You	r Income			
l	Fill in the tota	al amount of income yo	u received from all jobs and	ng a business during this you all businesses, including part e together, list it only once ur		endar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last calenda uary 1 to De	ır year: ecember 31, 2017)	■ Wages, commissions, bonuses, tips	\$41,511.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debt	or 1	Fra	ank Cassa	a			Cas	e number (if known)		
					Debtor 1 Sources of income	Gros	s income	Debtor 2 Sources of inco	ome	Gross income
					Check all that apply. (before exclusi		re deductions and sions)	Check all that ap	oply.	(before deductions and exclusions)
			dar year bef December 3		■ Wages, commissions bonuses, tips	3 ,	\$92,981.00	☐ Wages, components bonuses, tips	missions,	
					☐ Operating a business	3		☐ Operating a b	ousiness	
 	Inclu and winn	ide indother ings. each s	come regard public benefi If you are filin	ess of wheth t payments; ng a joint cas ne gross inco	e during this year or the er that income is taxable. pensions; rental income; in e and you have income the me from each source sep	Examples on terest; dividual terest; dividual terest; dividual terest.	of other income are a dends; money collec- tived together, list it o	alimony; child suppo sted from lawsuits; i only once under De	royalties; and btor 1.	
					Dahtan 4			Dahtan 2		
					Debtor 1 Sources of income Describe below.	each (befo	s income from source re deductions and sions)	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)
			y 1 of curren filed for ban		Pension		\$24,616.00			
			dar year: December 3	31, 2017)	Unemployment		\$10,231.00			
			dar year bef December 3		Retirement Income		\$60,000.00			
Part	3:	List	t Certain Pa	ments You	Made Before You Filed t	or Bankrur	otcy			
	Are □		r Debtor 1's Neither De	or Debtor 2' btor 1 nor D	s debts primarily consu ebtor 2 has primarily co personal, family, or house	mer debts? nsumer de	bts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
				•	re you filed for bankruptcy	, did you pa	ay any creditor a tota	ıl of \$6,425* or mor	e?	
			□ _{No.} □ _{Yes}		each creditor to whom you	•	' '	, ,		,
			* Subject t	not include	editor. Do not include payr payments to an attorney for son 4/01/19 and every 3 y	or this bank	ruptcy case.	•		•
		Yes.			r both have primarily co			ıl of \$600 or more?		
			■ No.	Go to line 7						
			□ Yes	include pay	each creditor to whom you ments for domestic suppo this bankruptcy case.					
	Cre	ditor'	's Name and	Address	Dates of pay	ment	Total amount paid	Amount you still owe	Was this p	payment for

Deb	ebtor 1 Frank Cassata		Cas	se number (if known)		
7.	Within 1 year before you filed for bank Insiders include your relatives; any gener of which you are an officer, director, perso a business you operate as a sole propriet alimony.	al partners; relatives of any ger on in control, or owner of 20% o	neral partners; partners partners or more of their voting	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporation ent, including one fo
	NoYes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment
8.	Within 1 year before you filed for banks insider? Include payments on debts guaranteed or		ments or transfer a	any property on a	ccount of a dek	ot that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite	
Par	rt 4: Identify Legal Actions, Reposses	ssions, and Foreclosures				
9.	Within 1 year before you filed for banks List all such matters, including personal ir modifications, and contract disputes. No Yes Fill in the details					
	— 166.1 iii iii tile detaile.	Notice of the coop	Court or oronor		Ctatus of the	
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Federal National Mortgage Association against Frank Cassata 513272-2016	foreclosure	Kings Suprem	e	■ Pending □ On appea □ Concluded	
10.	Within 1 year before you filed for banks. Check all that apply and fill in the details be. No. Go to line 11.		erty repossessed, f	foreclosed, garnis	shed, attached,	seized, or levied?
	Yes. Fill in the information below.	December the December		Data		Valera af dha
	Creditor Name and Address	Describe the Property Explain what happened	d	Date		Value of the property
11.	Within 90 days before you filed for ban accounts or refuse to make a payment No Yes, Fill in the details.	kruptcy, did any creditor, inc because you owed a debt?	luding a bank or fii	nancial institution	n, set off any an	nounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
				takei		
12.	Within 1 year before you filed for banks court-appointed receiver, a custodian, ■ No □ Yes		erty in the possess	ion of an assigne	ee for the benefi	t of creditors, a

Deb	otor 1 Frank Cassata	Case number	(if known)	
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankru ■ No ☐ Yes. Fill in the details for each gift.	otcy, did you give any gifts with a total value of more th	nan \$600 per person?	•
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and	Describe the gifts	Dates you gave the gifts	Value
	Address:			
14.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift or continuous process.	otcy, did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Par	tt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup or gambling?	cy or since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
	consulted about seeking bankruptcy or pr	ccy, did you or anyone else acting on your behalf pay of eparing a bankruptcy petition? eparers, or credit counseling agencies for services required		ty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 info@pankinlaw.com	Attorney Fees	6/2018	\$5,000.00
17.		ccy, did you or anyone else acting on your behalf pay of fors or to make payments to your creditors? ou listed on line 16.	r transfer any proper	ty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Debtor 1 Frank Cassata Case number (if known) 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance account number closed, sold, before closing or Address (Number, Street, City, State and ZIP instrument Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value

Part 10: Give Details About Environmental Information

Address (Number, Street, City, State and ZIP Code)

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

(Number, Street, City, State and ZIP

Debtor 1 Frank Cassata Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or
regulations controlling the cleanup of these substances, wastes, or material.
Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

Hazardous material means anything an environmental law defines as a hazardous waste hazardous substance toxic substance

to own, operate, or utilize it, including disposal sites.

_	hazardous material, pollutant, contaminant, or similar term.						
Rep	ort all notices, releases, and proceedings that	you know about, regardless of wher	n the	y occurred.			
24.	1. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice		
25. Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admir	nistrative proceeding under any envi	rironn	nental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case		
Pai	t 11: Give Details About Your Business or Co	onnections to Any Business					
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have ar	ny of	the following connections to any	business?		
	☐ A sole proprietor or self-employed in a	a trade, profession, or other activity,	, eithe	er full-time or part-time			
	☐ A member of a limited liability compar	ny (LLC) or limited liability partnersh	nip (L	LP)			
	☐ A partner in a partnership						
	☐ An officer, director, or managing exec	utive of a corporation					
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation	1				
	No. None of the above applies. Go to Par	rt 12.					
	☐ Yes. Check all that apply above and fill in	the details below for each business	s.				
	Business Name D	Describe the nature of the business		Employer Identification number Do not include Social Security r			
		Name of accountant or bookkeeper		Dates business existed	idilibei oi iiin.		
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all institutions, creditors, or other parties.					de all financial		
	No						
	Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					

Pebtor 1 Frank Cassata	Case number (if known)
Part 12: Sign Below	
are true and correct. I understand that making a fal	ncial Affairs and any attachments, and I declare under penalty of perjury that the answers lse statement, concealing property, or obtaining money or property by fraud in connection 50,000, or imprisonment for up to 20 years, or both.
/s/ Frank Cassata	
Frank Cassata Signature of Debtor 1	Signature of Debtor 2
Date July 6, 2018	Date
Did you attach additional pages to <i>Your Statement</i> ■ No □ Yes	of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not at ■ No	n attorney to help you fill out bankruptcy forms?
\square Yes. Name of Person Attach the Bankrupto	cy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your case:				
Debtor 1	Frank Cassata				
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the: Eastern District of New York					
Case number (if known)					

Check	Check as directed in lines 17 and 21:					
	According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	1: Calculate Your Average Monthly Income								
1.	What is your marital and filing status? Check one of	only.							
	■ Not married. Fill out Column A, lines 2-11.								
	☐ Married. Fill out both Columns A and B, lines 2-11.	•							
1 th	ill in the average monthly income that you received from al 01(10A). For example, if you are filing on September 15, the 6- te 6 months, add the income for all 6 months and divide the total couses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	d be Mar sult. Do	ch 1 through	gh August 31. e any income	If the ame	ount of your monthly incom nore than once. For examp	e varied during le, if both
						Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissi	ons (be	efore all	\$	0.00	\$	
3.	3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.				\$	0.00	\$		
4.	All amounts from any source which are regularly pof you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spot you listed on line 3.	t. Include	e regula: depende	r contrik nts, pai	outions rents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1						
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	-\$	0.00						
	Net monthly income from a business, profession, or fa	rm \$ _	0.00	Сору	here -> S	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor							
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	- \$	0.00						
	Net monthly income from rental or other real property	\$	0.00	Сору	here -> S	₿	0.00	\$	

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Debtor	Frank Cassata		Case number	er (<i>if known</i>)			
			Column A Debtor 1		Column B Debtor 2 c non-filing		
7. I	nterest, dividends, and royalties		\$	0.00	\$		
8. l	Unemployment compensation		\$	0.00	\$		
	Do not enter the amount if you contend that the amount received was a benef the Social Security Act. Instead, list it here:	fit under					
	For you\$	00					
	For your spouse\$						
	Pension or retirement income. Do not include any amount received that wa benefit under the Social Security Act.	is a	\$4	,102.76	\$		
] r (ncome from all other sources not listed above. Specify the source and an Do not include any benefits received under the Social Security Act or paymer received as a victim of a war crime, a crime against humanity, or international domestic terrorism. If necessary, list other sources on a separate page and protal below.	nts I or					
			\$	0.00	\$		
			\$	0.00	\$		
	Total amounts from separate pages, if any.	+	\$	0.00	\$		
	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	4,102.76	+ \$_		= \$	4,102.76
12. (Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one:					\$	4,102.76
ı	You are not married. Fill in 0 below.						
[☐ You are married and your spouse is filing with you. Fill in 0 below.						
ı	☐ You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse's						
	Below, specify the basis for excluding this income and the amount of inc adjustments on a separate page.	ome de	voted to eac	h purpose	e. If necessary	, list addit	ional
	If this adjustment does not apply, enter 0 below.						
		\$ \$					
		Ψ— +\$					
		ΤΨ					
	Total	\$	0.0	00 co	ppy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	4,102.76
15.	Calculate your current monthly income for the year. Follow these steps:	:					
	15a. Copy line 14 here=>					\$	4,102.76
	Multiply line 15a by 12 (the number of months in a year).					x 1	12
	15b. The result is your current monthly income for the year for this part of the	he form.				\$	49,233.12

Debto	or 1	Frank	c Cassata		Case number (if known)		
16.	. Cal	culate t	he median family income that applies to	you. Follow th	nese steps:		
	16a	. Fill in t	the state in which you live.	NY	·		
	16h	Fill in t	the number of people in your household.	2			
			he median family income for your state and	-	hold.	¢	68,087.00
17		To find	d a list of applicable median income amountations for this form. This list may also be avage lines compare?	s, go online u	sing the link specified in the separate	Ψ.	
17.	. 110v 17a	_	·	On the top of	page 1 of this form, check box 1, Disposable in	ncome is no	nt determined under
	174	_	•		alculation of Your Disposable Income (Official F		
	17b	. 🗆		ulation of Yo	his form, check box 2, <i>Disposable income is d</i> ur Disposable Income (Official Form 122C-2		
Part	3:	Calc	culate Your Commitment Period Under 11	U.S.C. § 132	5(b)(4)		
18.	Cop	y your	total average monthly income from line 1	11 .		\$	4,102.76
19.	con	tend tha	e marital adjustment if it applies. If you are at calculating the commitment period under to come, copy the amount from line 13.	e married, you 11 U.S.C. § 13	r spouse is not filing with you, and you s25(b)(4) allows you to deduct part of your		
	19a	. If the r	marital adjustment does not apply, fill in 0 on	line 19a.		- \$	0.00
	19b	. Subtra	act line 19a from line 18.			\$_	4,102.76
20.	Cal	culate y	our current monthly income for the year.	. Follow thes	e steps:		4 400 70
	20a	. Copy	line 19b			\$	4,102.76
		Multip	ly by 12 (the number of months in a year).				x 12
	20b	. The re	esult is your current monthly income for the y	ear for this pa	art of the form	\$	49,233.12
	20c	. Copy t	the median family income for your state and	size of house	hold from line 16c	\$	68,087.00
	21.	How o	do the lines compare?				
			ine 20b is less than line 20c. Unless otherwineriod is 3 years. Go to Part 4.	ise ordered b	the court, on the top of page 1 of this form, ch	neck box 3,	The commitment
			ine 20b is more than or equal to line 20c. Uncommitment period is 5 years. Go to Part 4.	nless otherwis	e ordered by the court, on the top of page 1 of	f this form,	check box 4, The
Part	4:	Sigr	n Below				
	Ву	signing	here, under penalty of perjury I declare that	the informatio	n on this statement and in any attachments is	true and co	rrect.
X			Cassata				
		ank Ca	assata of Debtor 1				
	•	July	6, 2018				
		MM /	DD / YYYY				
	-		ked 17a, do NOT fill out or file Form 122C-2 ked 17b, fill out Form 122C-2 and file it with		line 39 of that form, copy your current monthly	income fro	m line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Frank Cassata		Case No		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	NSATION OF ATTOI	RNEY FOR D	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be pa	d to me, for services rende	ered or to
	For legal services, I have agreed to accept		\$	7,000.00	
	Prior to the filing of this statement I have received		\$	5,000.00	
	Balance Due		\$	2,000.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are me	mbers and associates of m	y law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspect	s of the bankruptcy	case, including:	
	a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Loss Mitigation through the US Bankru	tement of affairs and plan which cors and confirmation hearing, ar	n may be required; and any adjourned he		tcy;
5.	By agreement with the debtor(s), the above-disclosed for The above fee does not include represe or any contested matters, adjournments appearance of the debtor, investigation debtors in any dischargeability actions proceeding and preparation and filing of	entation in any advesary pro s of the 341a creditors mee is or audits conducted by th , judicial lien avoidances, re	oceedings ting due to non ne U.S. Trustee's elief from stay a		
	The above fee also does not include the credit report.	e disbursements for the cou	urt filing fee, cre	dit counseling courses	s and a
		CERTIFICATION			
	I certify that the foregoing is a complete statement of an anarruptcy proceeding.	ny agreement or arrangement for	payment to me for	representation of the debt	or(s) in
_	uly 6, 2018 Pate	Is/ DAVID I. PANKIN DAVID I. PANKIN Signature of Attorne David I. Pankin, F 48 Willoughby St Brooklyn, NY 112 718-243-2444 Fa info@pankinlaw.o	, ESQ. ² .C. reet 201-5202 x: 718-243-1144		_

United States Bankruptcy Court Eastern District of New York

In re	Frank Cassata		Case No.	
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Brooklyn, NY 11201-5202 718-243-2444 Fax: 718-243-1144

USBC-44 Rev. 9/17/98

Computer Credit 470 West Hanes Mill Road Winston Salem NC 27113-5238

David I Pankin PC 48 Willoughby Street Brooklyn NY 11201

Internal Revenue Service PO Box 7346 Philadelphia PA 19101-7436

Knuckles Komosinski &
Manfro LLP
565 Taxter Rd, Suite 590
Elmsford NY 10523

Maimonides Medical Center PO Box 417629 Boston MA 02241

NYC Dept of Finance PO Box 3615 Church Street Station New York NY 10008-3615

NYC Dept of Finance OATH Violations Processin PO Box 2307 New York NY 10272-2307

NYC Water Board 59-17 Junction Blvd Elmhurst, NY Elmhurst NY 11373-5108

Prohealth Care Assoc LLP PO Box 3475 Toledo OH 43607-0475

Rosicki Rosicki & Asso PC 51 East Bethpage Road Plainview NY 11803

Rosicki Rosicki & Asso PC 2 Summit Court Suite 301 Fishkill NY 12524

Selene Finance 9990 Richmond Suite 400 South Houston TX 77042

US Department of Justice Tax Division Box 55 Ben Franklin Station Washington DC 20044

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	Frank Cassata	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure nowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) either of the Related Cases had, an interest in property that was or is included in the later than the later tha
■ NO RELATED	CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME.
☐ THE FOLLOWI	NG RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	CH CASES ARE RELATED (Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	CH CASES ARE RELATED (Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Discharge	d/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE a	bove):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("RESCHEDULE "A" OF RELATED CASE:	EAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who have be eligible to be debtors. Such an individual will be required to file	
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY	, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/N):	: <u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner or debtor I certify under penalty of perjury that the within bankruptcy case is as indicated elsewhere on this form.	
/s/ DAVID I. PANKIN, ESQ. DAVID I. PANKIN, ESQ. Signature of Debtor's Attorney David I. Pankin, P.C. 48 Willoughby Street	Signature of Pro Se Debtor/Petitioner
Brooklyn, NY 11201-5202 718-243-2444 Fax:718-243-1144	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
Failure to fully and truthfully provide all information required by the	Area Code and Telephone Number e E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009